



DIVISION OF AGING

INCIDENT REPORTING

Presenter: Brenda Hogan

Revised: 05/15/2013



INCIDENT REPORTING: POLICY

1. The Final Aging Rule (455 IAC 2-8-1) indicates, it is the policy of the Division of Aging (DA) to ensure the health, safety, and welfare of **ALL** individuals receiving services administered through the DA.
2. The policy was established to identify and address the immediate and potential risk to the health, safety, and welfare of individuals receiving services.
3. This policy addresses incidents which are known as Reportable Unusual Occurrences (RUO).



INCIDENT REPORTING: STANDARDS

1. Anyone with knowledge of an incident which affects or potentially affects the individual consumer's health, safety, and welfare shall submit an initial Incident Report (IR).
2. All providers of Home and Community Based Services (HCBS) are required to submit IR of RUO.
3. All Case Managers and Providers are required to report Incidents of RUO within forty-eight (48) hours of the time the incident occurred, or from the point of knowledge of the incident.
4. An initial IR involving an allegation or suspicion of abuse, neglect, exploitation, or the death of an individual must be submitted within **TWENTY-FOUR (24) hours** of the incident or knowledge of the incident.
5. Any staff suspected, alleged, or involved in an incident of abuse, neglect, or exploitation must be **SUSPENDED** immediately after the incident occurs and during the provider's investigation of the incident.



INCIDENT REPORTING: RUO

1. Alleged, suspected, or actual abuse, neglect, or exploitation of an individual shall be reported to Adult Protective Services (APS) for a consumer over the age of 18 or Child Protective Services (CPS) for a consumer under the age of 18.
2. Alleged, suspected, or actual assault by another individual or the consumer.
3. Death of an individual.
 - All deaths **MUST** be reported to APS or CPS.
4. A residence which compromises the health, safety, or welfare of an individual due to the interruption of a major utility.



INCIDENT REPORTING: RUO

5. Environmental or structural problems relating to a consumer's residence which compromises the health, safety, or welfare of the individual.
6. A residential fire resulting in:
 - Relocation
 - Personal Injury
 - Property Loss
7. Suspected or observed criminal activity by:
 - A staff member, employee, or agent of a provider
 - A family member of an individual receiving services
 - The individual receiving services
8. Injuries of unknown origin.

INCIDENT REPORTING: RUO

9. Suicidal ideation or a suicide attempt with the potential to cause physical harm, injury, or death.
10. A major disturbance or threat to public safety created by the consumer.
 - Note: The threat can be toward anyone, including staff, in an internal setting or outside the consumer's residence.
11. Admission of an individual to a Nursing Facility (NF); excluding a **RESPITE** stay.
 - Long-Term
 - Short-Term
 - Medical Needs
 - Rehabilitative Needs



INCIDENT REPORTING: RUO

12. Medication Error when it occurs at Assisted Living or AFC or Adult Day Services that involves:

- Wrong medication
- Wrong dose
- Missed dose
- Wrong route of administration

Note: If the medication error did not occur in one of the above settings, do not cite it.



INCIDENT REPORTING: RUO

13. Significant injury to an individual:

- Fracture
- Contusion
- Laceration
- Burn identified as greater than first degree

14. An injury that occurs while an individual is restrained.

- Restraints are prohibited.

15. Inadequate staff support with the potential for endangering the health, safety or welfare of the individual. This includes, but is not limited to, inadequate supervision of an individual.



INCIDENT REPORTING: RUO

16. A missing person.

INCIDENT REPORTING: HOW TO REPORT

1. Anyone with direct monitoring responsibility shall determine whether the event or concern represents:
 - A RUO
 - Suspected or actual Abuse
 - Suspected or actual Exploitation
 - Suspected or actual Neglect
 - Death
2. All RUO for consumers receiving funding under the Aged and Disabled (A&D), Traumatic Brain Injury (TBI), and Money Follows the Person (MFP) waiver shall be submitted over the internet through the Incidents & Follow-Up Reporting (IFUR) Tool. The address for the IFUR tool is as follows: <https://ddrsprovider.fssa.in.gov/IFUR/>



INCIDENT REPORTING: HOW TO REPORT

3. All RUO for consumers receiving funding under the Community and Home Options to Institutional Care for the Elderly and Disabled program (CHOICE), Social Services Block Grant (SSBG), Title III of the Older American Act (Title III), and Title III-E shall be submitted over the internet through any web browser. There are 2 web pages for incident reporting.
 - Page <https://myweb.in.gov/FSSA/aging/incident/incident.aspx> is for initial incident report.
 - Page <https://myweb.in.gov/FSSA/aging/incident/follow up.aspx> is for follow up reports.



INCIDENT REPORTING: HOW TO REPORT

Steps to Retrieve Incident Report (IR) for Non-Waiver Participant:

- CM will only receive an email with the IR number and confirmation code. No other information will be provided. To retrieve any notices the following steps should be followed.
- Go to the Non-Waiver “Incident Report Follow-Up Website”.
- Page <https://myweb.in.gov/FSSA/aging/incident/followup.aspx>
- Under the Section “Please Log In”.
- Log In as “Field Staff (Case Manager)”. Make sure the circle (O) is marked.
- Put in the IR number
- Put in the Confirmation Code
- Put in your email address as indicated in INsite
- Put in your CM identification number as listed in INsite
- After the completion of the above steps, the information regarding the IR should appear.



INCIDENT REPORTING: HOW TO REPORT

4. If an incident involves suspected or actual abuse, neglect, exploitation, and/or death of a person, the reporting entity shall also report the RUO to:
 - Adult Protective Service (APS): For consumers over the age of 18.
 - Child Protective Service (CPS): For consumers under the age of 18.
5. If an RUO involves suspected or actual abuse, neglect, exploitation, and/or death an incident report shall be completed and submitted to the DA within TWENTY-FOUR (24) hours of the occurrence or the point of knowledge of the incident.
6. The initial IR must include the following in regard to the report made to APS or CPS:
 - The name of person contacted
 - The telephone number
 - The date of contact
 - The county of contact



INCIDENT REPORTING: HOW TO REPORT

7. The narrative of the IR should be brief, but clear, about the details of:

- What happened?
- Who is involved?
- When did the incident occur?
- Where did the incident occur?
- Why is it a significant event or RUO?
- What steps will be taken to resolve the incident?
- What has already been done to resolve the incident?



INCIDENT REPORTING: HOW TO REPORT

8. The reporting entity shall make available a copy of the initial IR, at a minimum, to the following:

- The individual or the individual's legal representative
- The Case Manager (Independent and/or Area Agency on Aging)
- APS or CPS
- The individual's other service providers
- If relevant, a local law enforcement agency (i.e. city police, county sheriff, etc.)



INCIDENT REPORTING: REVIEW PROCEDURE

1. The DA staff, or it's designee, will be responsible for the review of initial IR.
2. The IR will be reviewed within one business day, or 7.50 business hours, of receipt.
3. The DA reviewer will determine if the provider of services, the provider of case management (CM), and/or any other reporting entity need to provide additional information.
4. The DA reviewer will determine if all appropriate notifications (APS, CPS, CM) have been made. If not, the DA reviewer will instruct the reporting entity to make the appropriate notifications.
5. If appropriate, the DA reviewer may notify APS or CPS.



INCIDENT REPORTING: REVIEW PROCEDURE

6. If the initial IR includes a feasible plan to resolve the incident, the DA reviewer will:
 - Confirm implementation of the plan.
 - Verify the consumer's health, safety, and welfare is safeguarded.
7. The DA reviewer will close the incident when the consumer's health, safety, and welfare concerns are successfully resolved.
8. The DA reviewer will determine if formal follow-up reports are required in addition to the initial IR.



INCIDENT REPORTING: FOLLOW-UP

1. Any notification of required follow-up is directed to the consumer's CM. If there is no CM identified, the notification will go to the **Area Agency on Aging (AAA) liaison**.
2. If the IR indicates a potential conflict of interest exists, and it would be inappropriate for the provider of CM to complete the follow-up report, the AAA liaison or the DA reviewer will designate a staff person to complete the required follow-up.
3. The CM, or the designated staff member, will contact the consumer, participants, providers, and other interested parties to discuss and address the incident in question.



INCIDENT REPORTING: FOLLOW-UP

4. After making contact with the parties involved, the CM, or the staff person designated for follow-up, will submit incident follow-up *reports* to the DA. The report must include:
 - A summary of the steps taken to resolve the incident
 - A detailed account of the current status of the incident
5. Follow-up reports must be completed within 7 days and every 7 days thereafter until the incident is resolved.
 - The DA sends delinquent follow up reports to every CM provider.



INCIDENT REPORTING: FOLLOW-UP

6. If the incident included an allegation of suspected abuse, neglect or exploitation, follow-up reports must be completed and returned to the DA reviewer within 24 hours of notification.
 - The DA reports the timeliness of filing to APS/CPS to CMS.
7. Any incident not resolved within 21 days of the initial IR, will be referred to the DA Director or designee for additional action.
 - The DA reports the length of time to resolve incidents to CMS.

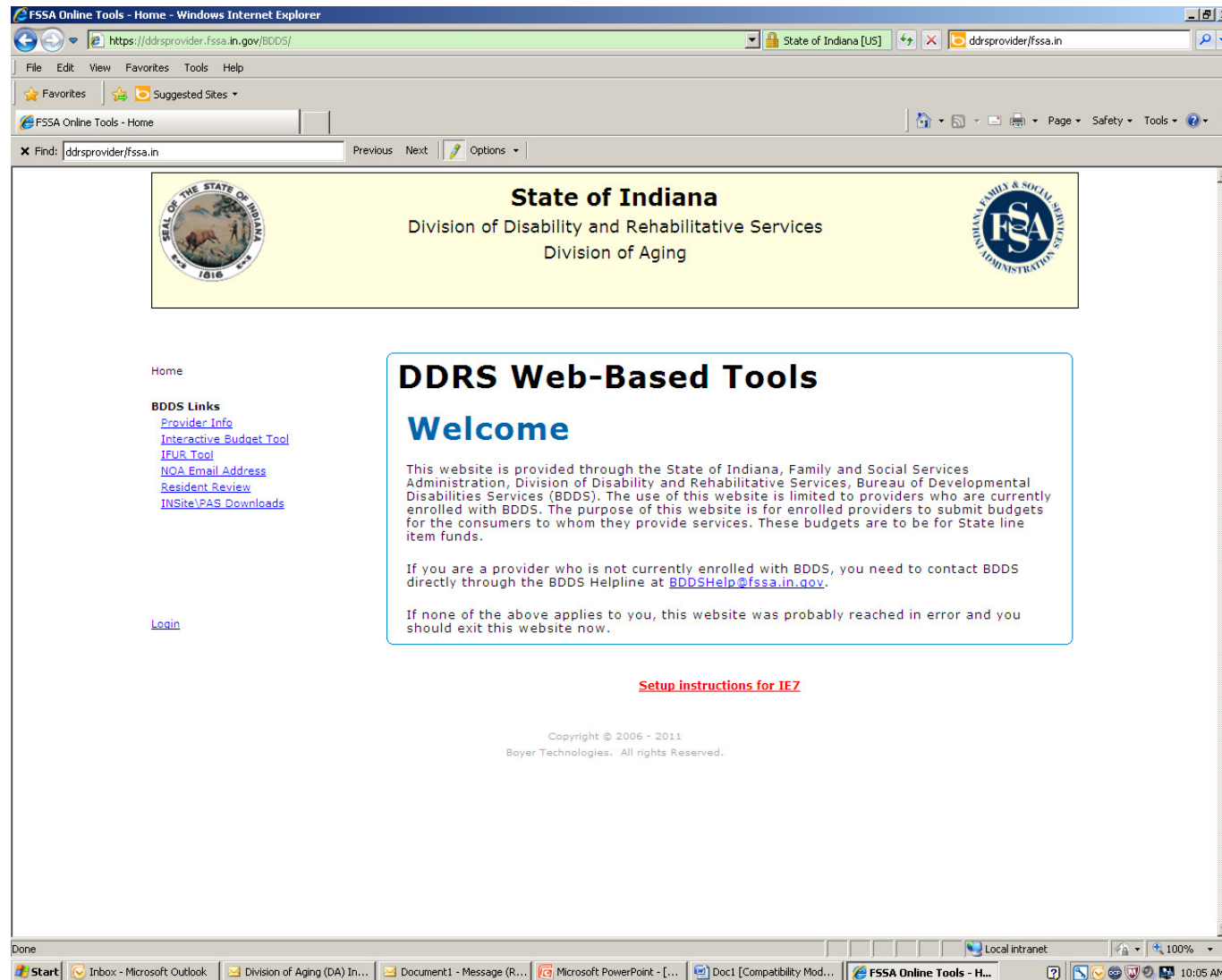
ADDITIONAL INFORMATION

1. A current list of local APS and LTC Ombudsman contact numbers and email addresses will be provided to you today.
2. The state of Indiana's toll-free APS hotline number is: (800) 992-6978
3. The state of Indiana's toll-free Complaint hotline number is: (888) 698-0003.
4. Medicaid Waiver participants' Incident Reports (including deaths) and Follow-up reports are reported via the internet, at: <https://ddrsprovider.fssa.in.gov/IFUR/>
5. Non-waiver participants' Incident Reports should be sent over the internet through any web browser. There are 2 web pages for incident reporting.
 - Page <https://myweb.in.gov/FSSA/aging/incident/incident.aspx>
 - Page <https://myweb.in.gov/FSSA/aging/incident/follow up.aspx> is for follow up r

ADDITIONAL INFORMATION/CONT.

- Go to www.in.gov
- Scroll down to “Quick Links” tab
- Under “Most Visited” select Family & Social Services Administration
- On the left-hand side of the screen, scroll down to “Divisions” and select Aging
- On the left-hand side of the screen, scroll down to “Programs and Services” and select either Adult Protective Services or Ombudsman to find the contact information for the APS units or the local ombudsman program.

ADDITIONAL INFORMATION/CONT.



To view the DA website, please visit: www.in.gov/fssa/da.
This will direct you to this website:



This screen links to the IR website, the user guide for the IR website, the “Aging” FINAL rule, and DA Incident Policies and Procedures.



The DA website includes a link for the Comprehensive Survey Tool (CST), a consumer-based POC review and satisfaction survey, and also includes a Provider Survey tool for non-licensed providers, supplemental tools for each service type under the HCBS waivers, and Frequently Asked Questions (FAQs) developed from the survey process.



Questions?

